Michigan Department of Labor & Economic Growth MICHIGAN LIQUOR CONTROL COMMISSION (MLCC) 7150 Harris Drive, P.O. Box 30005 Lansing, Michigan 48909-7505

Signature

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Commission Use Only

APPLICANT QUESTIONNAIRE - New On-premises Banquet Facility Permit (Authorized by MCL 436.1522)

INSTRUCTIONS: To apply for a new On-premises Banquet Facility Permit complete and return this questionnaire with a \$70 inspection fee to the address printed above. Name of Licensee(s) (Individual, partnership, corporation, limited liability company) Current Business Address (Street, City, Township, County, Zip Code) Type of License and Number: Total Gross Receipts of Business:__ Year Amount Year Amount Total Gross Receipts of Food and Non-alcoholic Beverages: Year Amount Year Amount * Please be advised the statute prescribes that you must demonstrate that at least 50% of the gross receipts of your current business is from the sale of food and non-alcoholic beverages prepared for consumption on the premises. Proposed Address of Banquet Facility (Street, City, Township, County, Zip Code) Do you or Will you have control of this facility? YES NO Property document & diagram attached? YES NO WILL BE AVAILABLE *Please be advised that you must provide a diagram and documentation that demonstrates a preexisting ownership or lease interest in the banquet facility prior to issuance of the permit. Permits Requested for Banquet Facility: ___Dance ___Entertainment ___Outdoor Service ___Sunday Sales Topless Activity Direct Connection Food ____Golf ____ Miscellaneous ___ List types of scheduled events and functions that will be held at this facility: List the hours of operation at this facility: *Please be advised that a banquet facility shall not have regular meal service and shall not be generally open to the public. Print name of contact person Title Mailing address if different from above Telephone Number

LC-618BF Rev. 01/04 The Department of Labor & Economic Growth will not discriminate against any individual or group because of sex, religion, age, national origin, color, marital status, disability or political affiliation. If you need assistance with reading, writing, hearing, etc., under the Americans with Disabilities Act, you may make your needs known to this agency.

Date